

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)USE FEC MAILING LABEL
OR TYPE OR PRINT ▼Example: If typing, type
over the lines

Mary Bono Committee

ADDRESS (number and street)
▼

P.O. Box 3370

☐Check if different
than previously
reported. (ACC)

Palm Springs

CA

92263

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00332890

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

CA

45

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☒

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

1 1

2 8

2 0 0 6

through

1 2

3 1

2 0 0 6

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Meredith G. Kelley

Signature of Treasurer

Electronically Filed by Meredith G. Kelley

Date

0 1

2 5

2 0 0 7

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Mary Bono Committee

Report Covering the Period:

From:

M M
1 1D D
2 8Y Y Y Y
2 0 0 6

To:

M M
1 2D D
3 1Y Y Y Y
2 0 0 6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	3635.00	1493060.51
(b) Total Contribution Refunds (from Line 20(d)).....	4245.00	15645.92
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-610.00	1477414.59
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	47154.39	1545714.17
(b) Total Offsets to Operating Expenditures (from Line 14).....	.00	3398.16
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	47154.39	1542316.01
8. Cash on Hand at Close of Reporting Period (from Line 27).....	156396.37	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name

Mary Bono Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	1	2	8	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	6

I. RECEIPTS

COLUMN A
Total This PeriodCOLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

1425.00

827482.17

(ii) Unitemized.....

2210.00

160980.37

(iii) TOTAL of contributions

3635.00

988462.54

from individuals..... ►

(b) Political Party Committees.....

.00

.00

(c) Other Political Committees
(such as PACS).....

.00

504597.97

(d) The Candidate.....

.00

.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

3635.00

1493060.51

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES.....

.00

.00

13. LOANS

(a) Made or Guaranteed by the
Candidate.....

.00

.00

(b) All Other Loans.....

.00

.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

.00

.00

14. OFFSETS TO OPERATING
EXPENDITURES

(Refunds, Rebates, etc.).....

.00

3398.16

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

.00

.00

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)..... ►

3635.00

1496458.67

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	47154.39	1545714.17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	.00	.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	.00	.00
(b) Of all Other Loans.....	.00	.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	.00	.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	4245.00	14345.92
(b) Political Party Committees.....	.00	.00
(c) Other Political Committees (such as PACs).....	.00	1300.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	4245.00	15645.92
21. OTHER DISBURSEMENTS.....	2000.00	7350.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	53399.39	1568710.09

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	206160.76
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	3635.00
25. SUBTOTAL (add Line 23 and Line 24).....	209795.76
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	53399.39
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	156396.37

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 / 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Committee

Full Name (Last, First, Middle Initial)

A. April Acker

Mailing Address 49338 Escalante Street

City State Zip Code
 Indio CA 92201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self employed

Occupation
Real estate

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 2 0 / 2 0 0 6

Transaction ID: 1168983327942

Amount of Each Receipt this Period

300.00

Check

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Ann C. Byfield

Mailing Address 75-365 St Andrews Ct

City State Zip Code
 Indian Wells CA 92210

FEC ID number of contributing
federal political committee.

C

Name of Employer
Info Requested

Occupation
Info Requested

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 2 0 / 2 0 0 6

Transaction ID: 1168983278709

Amount of Each Receipt this Period

100.00

Check

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. George Dennis

Mailing Address 412 Oliver ST
 #511

City State Zip Code
 Huntington Beach CA 92648

FEC ID number of contributing
federal political committee.

C

Name of Employer
Info requested

Occupation
Info requested

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 2 0 / 2 0 0 6

Transaction ID: 1168979327955

Amount of Each Receipt this Period

20.00

Check

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

420.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Committee

A. Full Name (Last, First, Middle Initial)
Preston G. Heimark
Mailing Address 78-695 St. Thomas Drive

City State Zip Code
Bermuda Dunes CA 92201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Info Requested

Occupation
Info Requested

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 0 / 2 0 0 6

Transaction ID: 1168982611782

Amount of Each Receipt this Period

125.00

Check

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Joseph Kuzmanic
Mailing Address 17 PRINCETON DR

City State Zip Code
RANCHO MIRAGE CA 92270

FEC ID number of contributing
federal political committee.

C

Name of Employer
Info Requested

Occupation
Info Requested

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 0 / 2 0 0 6

Transaction ID: 1168983098747

Amount of Each Receipt this Period

150.00

Check

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Gary M. Plummer
Mailing Address PO Box 1843

City State Zip Code
Monterey CA 93942

FEC ID number of contributing
federal political committee.

C

Name of Employer
Peninsula Moving and Stor-
age Co

Occupation
President

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 2 / 2 0 0 6

Transaction ID: 1169050723671

Amount of Each Receipt this Period

250.00

Check

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

525.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Committee

A. Full Name (Last, First, Middle Initial)
Robert N Pyle
Mailing Address 50225 Via Simpatico

City State Zip Code
La Quinta CA 92253

FEC ID number of contributing
federal political committee.

C

Name of Employer
Info requested

Occupation
Info requested

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
620.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 2 / 2 0 0 6

Transaction ID: 1169050521710

Amount of Each Receipt this Period

180.00

Check

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Richard N. Roger
Mailing Address 39321 Kersten Road

City State Zip Code
Rancho Mirage CA 92270

FEC ID number of contributing
federal political committee.

C

Name of Employer
Info Requested

Occupation
Info Requested

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 2 / 2 0 0 6

Transaction ID: 1169050630706

Amount of Each Receipt this Period

100.00

Check

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
John Tallmadge
Mailing Address 1050 Minnewawa

City State Zip Code
Clovis CA 93612

FEC ID number of contributing
federal political committee.

C

Name of Employer
Info Requested

Occupation
Info Requested

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
267.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 2 / 2 0 0 6

Transaction ID: 1169050876868

Amount of Each Receipt this Period

50.00

Check

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Bono Committee

A.

Full Name (Last, First, Middle Initial)

John Works

Mailing Address 24889 W Acacia Ave

City

Hemet

State

CA

Zip Code

92545

FEC ID number of contributing
federal political committee.

C

Name of Employer
Info requested

Occupation

Info requested

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 2 / 2 0 0 6

Transaction ID: 1169050913054

Amount of Each Receipt this Period

150.00

Check

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

1425.00

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 20

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Mary Bono Committee

Full Name (Last, First, Middle Initial)

A. Ms Adriana Avila

Mailing Address 1555 South Palm Canyon, Suite D105

City State Zip Code
Palm Springs CA 92264

Purpose of Disbursement
Salary

Candidate Name

001
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1164920173206

Date of Disbursement

11 / 28 / 2006

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Ms Adriana Avila

Mailing Address 1555 South Palm Canyon, Suite D105

City State Zip Code
Palm Springs CA 92264

Purpose of Disbursement
Mileage Reimbursement

Candidate Name

001
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1168636938561

Date of Disbursement

12 / 04 / 2006

Amount of Each Disbursement this Period

1264.64

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Bellwether Consulting Group

Mailing Address 1775 I Street, NW
Ste 700

City State Zip Code
Washington DC 20006

Purpose of Disbursement
Faxing, Printing & shipping

Candidate Name

001
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1168633310482

Date of Disbursement

12 / 19 / 2006

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

4264.64

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Mary Bono Committee

Full Name (Last, First, Middle Initial)

A. Bieber Communications

Mailing Address 3605 W. MacArthur Boulevard
Ste. 712

City Santa Ana State CA Zip Code 92704

Purpose of Disbursement
Printing/mailling services

Candidate Name

001
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1168633785385

Date of Disbursement

12 / 11 / 2006

Amount of Each Disbursement this Period

2110.43

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Jon-Marc Blalock

Mailing Address PO Box 2551

City Palm Desert State CA Zip Code 92261

Purpose of Disbursement
Salary

Candidate Name

001
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1164919871683

Date of Disbursement

11 / 28 / 2006

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Paul Cancienne

Mailing Address PO Box 3770

City Palm Springs State CA Zip Code 92263

Purpose of Disbursement
Salary

Candidate Name

001
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1164920223471

Date of Disbursement

11 / 28 / 2006

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

5110.43

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Mary Bono Committee

Full Name (Last, First, Middle Initial)

A. Cardinal Promotions

Mailing Address 68-895 Perez Road
Suite 16

City Cathedral City State CA Zip Code 92234

Purpose of Disbursement
embroidery service

Candidate Name

001
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1168635019354

Date of Disbursement

12 / 06 / 2006

Amount of Each Disbursement this Period

705.12

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Cingular Wireless

Mailing Address 17330 Preston Road
Suite 100A

City Dallas State TX Zip Code 75252

Purpose of Disbursement
Phone Service

Candidate Name

001
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1168633565863

Date of Disbursement

12 / 19 / 2006

Amount of Each Disbursement this Period

120.51

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Cingular Wireless

Mailing Address 17330 Preston Road
Suite 100A

City Dallas State TX Zip Code 75252

Purpose of Disbursement
Phone Service

Candidate Name

001
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1168635304936

Date of Disbursement

12 / 06 / 2006

Amount of Each Disbursement this Period

98.72

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

924.35

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 / 20

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Bono Committee

Full Name (Last, First, Middle Initial)

A. Complete CampaignsMailing Address 610 Gateway Center Way
Suite K

City San Diego State CA Zip Code 92102

Purpose of Disbursement

Fax Broadcasting

Candidate Name

001
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1168634228243

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	1	/	2	0	0	6

Amount of Each Disbursement this Period

182.25

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Federal Express

Mailing Address PO Box 1140

City Memphis State TN Zip Code 38101

Purpose of Disbursement

Shipping

Candidate Name

001
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1168635229611

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	6	/	2	0	0	6

Amount of Each Disbursement this Period

1376.09

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. GE Capital

Mailing Address PO Box 31001

City Pasadena State CA Zip Code 91110

Purpose of Disbursement

Coping/faxing services

Candidate Name

001
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1168635372528

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	6	/	2	0	0	6

Amount of Each Disbursement this Period

169.17

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

1727.51

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Mary Bono Committee

Full Name (Last, First, Middle Initial)

A. Sabrina Garcia

Mailing Address 81944 Villa Reale

City Indio State CA Zip Code 92203

Purpose of Disbursement
Salary

Candidate Name

001
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1164919805747

Date of Disbursement

11 / 28 / 2006

Amount of Each Disbursement this Period

5000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Sabrina Garcia

Mailing Address 81944 Villa Reale

City Indio State CA Zip Code 92203

Purpose of Disbursement
Mileage Reimbursement

Candidate Name

001
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1168636859470

Date of Disbursement

12 / 04 / 2006

Amount of Each Disbursement this Period

382.70

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Jivaldi LLC

Mailing Address 2735 Eagles Landing Court

City Dublin State CA Zip Code 94568

Purpose of Disbursement
Web Hosting/Maintenance

Candidate Name

001
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1168634126216

Date of Disbursement

12 / 11 / 2006

Amount of Each Disbursement this Period

1862.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

7245.20

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Bono Committee

Full Name (Last, First, Middle Initial)

A. Pitney Bowes Inc.

Mailing Address 1201 Market Street

City
WilmingtonState
DEZip Code
19801

Purpose of Disbursement

Postage by phone

Candidate Name

001
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1168636026518

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	6		2	0	0	6

Amount of Each Disbursement this Period

3830.83

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Plaza Del SolMailing Address 1555 S. Palm Canyon Drive
Suite G106City
Palm SpringsState
CAZip Code
92264

Purpose of Disbursement

Monthly office rental

Candidate Name

001
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1164920374170

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	8		2	0	0	6

Amount of Each Disbursement this Period

665.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Riverside County Treasurer

Mailing Address 4080 Lemon Street, Fourth Floor

City
RiversideState
CAZip Code
92501

Purpose of Disbursement

Payment of Lien

Candidate Name

001
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1168636332334

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	6		2	0	0	6

Amount of Each Disbursement this Period

1005.45

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

5501.28

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Bono Committee

Full Name (Last, First, Middle Initial)

A. SCM AssociatesMailing Address 10 Main Street
PO Box 720

City Jaffrey State NH Zip Code 03452

Purpose of Disbursement
Printing/Shipping services

Candidate Name

001
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1168633681514

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	9		2	0	0	6

Amount of Each Disbursement this Period

7187.66

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Sparkletts

Mailing Address P.O. Box 7126

City Pasadena State CA Zip Code 91109-7126

Purpose of Disbursement
water delivery service

Candidate Name

001
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1168636381958

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	6		2	0	0	6

Amount of Each Disbursement this Period

.95

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. The Desert SunMailing Address P.O. Box 2735
750 N. Gene Autry Trail

City Palm Springs State CA Zip Code 92262

Purpose of Disbursement
Cable service

Candidate Name

001
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1168633204376

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	9		2	0	0	6

Amount of Each Disbursement this Period

42.58

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

7231.19

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Bono Committee

Full Name (Last, First, Middle Initial)

A. Time Warner Cable

Mailing Address 41725 Cook Street

City	State	Zip Code
Palm Desert	CA	92211-5100

Purpose of Disbursement

Cable service

Candidate Name

Category/
Type

 Office Sought: ☒ House
☐ Senate
☐ President

 Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1168633157503

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	9		2	0	0	6

Amount of Each Disbursement this Period

151.17

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Marc TroastMailing Address 1555 South Palm Canyon Drive
Suite D-105

City	State	Zip Code
Palm Springs	CA	92264

Purpose of Disbursement

Voided Check

Candidate Name

Category/
Type

 Office Sought: ☒ House
☐ Senate
☐ President

 Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1165961326162

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	2		2	0	0	6

Amount of Each Disbursement this Period

-1257.13

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Marc TroastMailing Address 1555 South Palm Canyon Drive
Suite D-105

City	State	Zip Code
Palm Springs	CA	92264

Purpose of Disbursement

Salary

Candidate Name

Category/
Type

 Office Sought: ☒ House
☐ Senate
☐ President

 Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 1168632904716

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	0		2	0	0	6

Amount of Each Disbursement this Period

10000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

8894.04

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Bono Committee

Full Name (Last, First, Middle Initial)

A. Tuttle & Tuttle

Mailing Address 12 Fort Williams Parkway

City	State	Zip Code
Alexandria	VA	22304

Purpose of Disbursement
holiday card printing

Candidate Name

001
Category/ Type

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	2008
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> General

Transaction ID: 1168635451462

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	6		2	0	0	6

Amount of Each Disbursement this Period

4567.72

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address PO Box 2167

City	State	Zip Code
Folsom	CA	95763

Purpose of Disbursement
Cell Phone bill

Candidate Name

001
Category/ Type

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	2008
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> General

Transaction ID: 1168633027868

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	9		2	0	0	6

Amount of Each Disbursement this Period

148.24

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address PO Box 2167

City	State	Zip Code
Folsom	CA	95763

Purpose of Disbursement
Mobile telephone charges

Candidate Name

001
Category/ Type

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	2008
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> General

Transaction ID: 1168633618423

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	9		2	0	0	6

Amount of Each Disbursement this Period

539.79

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

5255.75

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Mary Bono Committee

Full Name (Last, First, Middle Initial)

A. Williams & Jensen, PLLC

Mailing Address 1155 21st Street NW
Suite 300

City Washington State DC Zip Code 20036

Purpose of Disbursement
legal retainer

Candidate Name

001
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 1164920314312

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

47154.39

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Bono Committee

Full Name (Last, First, Middle Initial)

A. Michael Barrett

Mailing Address 15000 Surveyor Blvd
Suite100

City Addison State TX Zip Code 75001

Purpose of Disbursement

Refund of Contribution

Candidate Name

010
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 1165505980227

Date of Disbursement

12 / 07 / 2006

Amount of Each Disbursement this Period

1200.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Mrs. Bobbie Bozick

Mailing Address 77330 Medicine Bow Circle

City Indian Wells State CA Zip Code 92210

Purpose of Disbursement

Refund of Contributions

Candidate Name

010
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 1168634970481

Date of Disbursement

12 / 08 / 2006

Amount of Each Disbursement this Period

2900.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Mr. Wesley Oliphant

Mailing Address 77-900 Avenue of the States

City Palm Desert State CA Zip Code 92211

Purpose of Disbursement

Refund of Contributions

Candidate Name

001
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 1168634861360

Date of Disbursement

12 / 08 / 2006

Amount of Each Disbursement this Period

145.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

4245.00

TOTAL This Period (last page this line number only)

4245.00

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 20

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Bono Committee

Full Name (Last, First, Middle Initial)

A. Hastert For Congress Committee

Mailing Address PO Box 625

City
Batavia

State
IL

Zip Code
60510

Purpose of Disbursement
Debt Retirement

Candidate Name
J. Dennis Hastert

Office Sought: ☒ House
☐ Senate
☐ President

State: IL District: 14

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 1168634735896

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00